

UNITED STATES PECEIVED SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 1 2007

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	OMB APPROVAL						
ОМ	OMB Number: 3235-0076						
Exp	Expires: April 30, 2008						
Esti	Estimated average burden						
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SEC USE ONLY							
Prefix Serial							
DATÉ RECEIVED							

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	11/11/79/
Common Stock	11911/5
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Enkata Technologies, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2121 S. El Camino Real, Suite 1200, San Mateo, CA 94403	(650) 227-6500
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same as above.	Telephone Number (Including Area Code) Same as above.
Brief Description of Business Software Solutions	B PROCESSED
Type of Business Organization Corporation Dusiness trust Dimited partnership, already formed Dimited partnership, to be formed	er (please specify): MAR 0 8 2007
Month Year	Actual Estimated FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC IDENT	IFICATION DATA						
2. Enter the information rec									
		er has been organized with							
 Each beneficial ow securities of the issu 									
		corporate issuers and of co	rporate general and manag	ing partners of pa	rtnership issuers: and				
Each general and m		•		, 8 p	,,,,				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	■ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Stamm, David A									
Business or Residence Addres		reet. City. State. Zip Code)	<u> </u>						
	•		Suite 1200, San Mateo	CA 94403	·				
	Promoter	Beneficial Owner	Executive Officer	Director	General and/or				
Check Box(es) that Apply:	Fromoter	M Belieficial Owlief	Z Executive Officer	M Director	Managing Partner				
Full Name (Last name first, if	individual)								
Hildebrandt, Ro	nald E.								
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)							
	•	-	Suite 1200, San Mateo	. CA 94403					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Stukov, Stan N.	,								
Business or Residence Addres	ss (Number and St	reet, City, State, Zip Code)							
	•		Suite 1200, San Mateo	, CA 94403					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)	-							
Apex Venture Pa	ertners and affil	iated funds							
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)							
225 W. Washing	ton, Suite 1500,	Chicago, IL 60606							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
ComVentures V,	L.P. and affilia	ted funds							
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			····				
305 Lytton Aven	ue, Palo Alto, C	A 94301							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Sigma Partners (6, L.P. and affili	ated funds							
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)							
4000 Executive I	arkway, Ste. 53	0, San Ramon, CA 945	583						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if Chen, Michael	individual)								
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code))						
			Suite 1200, San Mated	o, CA 94403					

	-]	B. INFOR	MATION	ABOUT O	FFERING					
						• •	1.					Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							Ш	\boxtimes					
2. Wh:									\$N/A				
2. ******	at is the im		estilient ti	at ****** oc	accepted ii	om uny ma					<u> </u>	Yes	No
3. Doe	s the offeri	ng permit j	joint owne	rship of a	single unit	?		•••••				\boxtimes	
com offe and	mission or ring. If a poor to a second	similar re person to state or sta	muneratio be listed i tes, list th	n for solid s an assoc e name of	citation of iated person the broker	purchasers on or agent or dealer.	in connect of a broker If more th	or given, dirion with sar or dealer rean five (5) for the broken	les of secur egistered wi persons to b	th the SEC e listed are			
Full Nam	ne (Last nar	ne first, if	individual)									
Business	or Residen	ice Addres	s (Number	and Stree	t, City, Sta	te, Zip Cod	e)	••		· · · · · · · · · · · · · · · · · · ·			
Name of	Associated	Broker or	Dealer									•	
	Which Per												
(Check	k "All State	s" or checl	k individu	al States).	***************************************				***************************************	***************************************		_	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]	[1D	-
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[N]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	•
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P F	
Full Nan	ne (Last nar	ne first, if	individual)									
Business	or Resider	ce Addres	s (Numbe	r and Stree	et, City, Sta	te, Zip Cod	le)			<u></u>	<u></u>		
Name of	Associated	Broker or	Dealer					<u> </u>	- '''			<u> </u>	
	Which Per												
(Checl	k "All State	s" or chec	k individu	al States)					***************		***********	∐A	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]		[CT]				[GA]		[10	•
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]					[MN]			
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	-
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P F	<u> </u>
Full Nan	ne (Last nai	me first, if	individual)									
Business	or Resider	nce Addres	s (Numbe	r and Stree	et, City, Sta	ite, Zip Coo	le)			·	•		
Name of	Associated	l Broker or	Dealer		10								
States in	Which Per	son Listed	Has Solic	ited or Int	ends to Sol	licit Purcha	sers		<u>. </u>				
												□ A	II States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]	[[[)]
[1L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	0]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P /	A]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P I	R]

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ -0-	\$ -0-
	Equity	\$128,100.00	\$128,100.00
	Common Preferred		_
	Convertible Promissory Notes and Warrants	\$ -0-	\$ -0 -
	Partnership Interests	\$ -0-	s -0-
	Other (Specify)	\$ -0-	S -0-
	Total	\$128,100.00	\$128,100.00
	Answer also in Appendix, Column 3, if filing under ULOE.	· · · · · · · · · · · · · · · · · · ·	- -
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
	•	Number of Investors	Dollar Amount of Purchases
	Accredited Investors	1	\$128,100.00
	<u> </u>	0	\$ -0-
	Non-accredited Investors		\$ -0-
	Total (for filings under Rule 504 only)		J
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505	N/A	\$ N/A
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$ N/A
	Total	N/A	\$ <u>N/A</u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$ <u>-0</u>
	Printing and Engraving Costs] \$ -0-
	Legal Fees	_	\$To Be Determined
	Accounting Fees]
	Engineering Fees] \$ <u>-</u> 0-
	Sales Commissions (specify finder's fees separately)	_	\$ -0-
	Other Expenses (identify)		\$ -0-
	Total		\$To Be Determined

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, 1	<u>NUMBER OF INVESTORS, EXPENSES AT</u>	ND US	E OF	PROCEED:	<u>s</u>			
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."						\$ 128,100.00		
5.	to be used for each of the purposes shown. furnish an estimate and check the box to	gross proceeds to the issuer used or proposed If the amount for any purpose is not known, the left of the estimate. The total of the sa proceeds to the issuer sct forth in response							
				C	ayments to Officers, Directors, & Offiliates	P	ayments To Others		
•	Salaries and fees		□ \$	-(<u>-</u>	□ s	-0-		
	Purchase, rental or leasing and installati	on of machinery and equipment	□ s	-0)-	□ \$	-0		
	Construction or leasing of plant building	gs and facilities	□ \$	-() 	□ s	-0-		
	Acquisition of other business (including offering that may be used in exchange fi issuer pursuant to a merger)	the value of securities involved in this or the assets or securities of another	s	-0	 -	_ □s	-0-		
	Repayment of indebtedness	***************************************	☐ \$	-0) <u> </u>	□ s	-0-		
	Working capital		□ s	-0	-	× \$12	8,100-00		
	Other (specify):		<u> </u>			_			
			□ \$	-0	<u> -</u>	□ s _	~() <u>-</u>		
			□ s	-0	.	⊠ \$12	8,100.00		
	Total Payments Listed (column totals ad	ded)			\square	\$128,10			
		·				· · · · · · · · · · · · · · · · · · ·			
		D. FEDERAL SIGNATURE			 -		· · · · · · · · · · · · · · · · · · ·		
_									
follo requ	issuer has duly caused this notice to be signed wing signature constitutes an undertaking by est of its staff, the information furnished by the	by the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities an e issuer to any non-accredited investor pursuan	f this n id Excl it to pa	iotice i hange ragrap	s filed under Commission h (b)(2) of R	Rule 50: , upon w ule 502.	itten		
Issu	er (Print or Type)	Signature) ()		Date					
Enk	ata Technologies, Inc.	LA Ustes		Febri	_{12ry} 15 _{, 20}	107			
Nan	e or Signer (Print or Type)	Title of Signer (Print or Type)							
Dav	id A. Stamm	President							

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)